Incident Report

Print Date/Time:

10/14/2019 09:34

Login ID:

gmurphy

St Joseph Police Department

ORI Number:

MO0110100

Incident:

2018-00007401

Incident Date/Time:

Location:

1/30/2018 12:10:00 PM

ST JOSEPH MO 64506

Phone Number:

(816)248-1889 No

No

Report Required:

Prior Hazards:

LE Case Number:

3702 FREDERICK AVE

Incident Type:

Disturbance

Venue:

SJ

Race

Source:

Telephone

Priority: Status:

Phone

In Progress

Nature of Call:

Unit/Personnel

Unit

Personnel

207 2X5 34265-Hailey 47672-Kneib

2018-00007401

Person(s)

1

No. Role Name

EAST HILLS MALL SECURITY

E911 Caller

Complainant

CLARY, ROGER

<UNKNOWN>

Address

Vehicle(s)

Role

Type

Count

1

2

Make

Year

Model

Color

License

State

DOB

Disposition(s)

Disposition

RP CL

Property

Date Code Туре

Make

Model

Description

Tag No.

Sex

Item No.

Page: 1 of 2

EXHIBIT I

CAD Narrative

01/30/2018 12:10:26 gnorton Narrative: IN FRONT OF THE LIBRARY
01/30/2018 12:10:30 gnorton Narrative: SUBJ REFUISNG TO LEAVE MALL LOT
01/30/2018 12:10:45 gnorton Narrative: WF EARLY 20S
01/30/2018 12:11:10 gnorton Narrative: CALLER IS SECURITY FOR THE MALL
01/30/2018 12:11:25 gnorton Narrative: LSW BLK COAT WHI TURTLE NECK BLK PANTS AND BLK BOOTS
01/30/2018 12:11:49 gnorton Narrative: CALLER IS OUT WITH HER
01/30/2018 12:13:53 gnorton Narrative: ** ALSO RECEIVED ALEX WITH FIELDWORKS AND HE ADVISED THAT SHE IS
THERE WITH A PETITION THAT SHE WANTS PEOPLE TO SIGN AND SHE THINKS IT IS PUBLIC PROPERTY - HIS
CALL BACK NUMBE RIS 503-799-7190
01/30/2018 12:28:06 mhagler Narrative: ARNOLD,STACY KAYE 06101985
01/30/2018 12:28:20 mhagler Narrative: OLN 01142858

Global Subject Activity Report

Detail

Print Date/Time:

10/14/2019 09:31

Login ID: ARNOLD, STACY KAYE

gmurphy

Jacket: 629326 A

SSN:

Female

St Joseph Police Department ORI Number: MO0110100

1589 RACCOON RD

MAYESVILLE

SC 29104-8995 Height:

Sex:

5ft 3in to 5ft 3in

Phone #: (803)428-7024

Weight:

138.0 lbs. to

DOB: 06/10/1985

Eyes: Hair:

138.0 lbs. BLU

Race: White DL State:

MO

DL#:

BLN 011428658

Physical Characteristics:

Appearance:

Country/State of Birth:

SOUTH

Age Range:

Hair Style: Hair Length:

Straight Long (Below City of Birth:

CAROLINA SUMPTER

Hand Preference:

30 to 34 Right

Facial Shape:

Shoulder) Oval

County of Origin: Ethnicity:

Non Hispanic

Place of Birth: Occupation:

Complexion: Build:

Fair Average/Medium Citizenship: Tribe:

*US

of Dependents:

Other

Glasses: Teeth:

None None Hate Group:

Military Service:

Primary Language: Second Language:

English

Speech: Voice:

Mustache:

Military Discharge: School:

No Beard

Gang Affiliation: Marital Status: Blood Type:

None Single

None Konnyic Offertelas: No

Beard: **DNA Collected Date:**

Religion: Illegal Alien:

No

Modus Operandi

County of Conviction: **Identifying Clothing:**

State Of Conviction:

Crime Specialities

Aliases

Type Alias

DOB

Race

Sex

SSN

Hair

Eves DI#

Height

Nicknames

Entered Date/Time

Nickname Type

Nickname

Weight Phone

Associated IDs

Issue Date

ID Type

Number

Name

Relationship

Relationship

Issuing State

Start Date

Expire Date

Known Associates

School/Employer Information School/Employer Name

Phone Type

Phone

Scars, Marks, Tattoos

Type Tattoo

Location TAT BACK

Scar, Mark or Tattoo Detail Other

Description HAS 2 HANDS HOLDING EACH OTHER AND A ROSE ON LEFT SHOULDER BLADE

Handicap Information

Handicap

Current Address Information

Prior Address Information

Address Type

Address

City

State

Zip

Page: 1 of 2

Global Subject Activity Report

Detail

Print Date/Time:

10/14/2019 09:31

Login ID: Address Type gmurphy

Address

1589 RACOON RD

1589 RACCOON RD

City MAYSVILLE

MAYSEVILLE

State SC

SC

Zip 29104-

8995

8995 29104From Date

Extension

ORI Number: MO0110100 To Date

St Joseph Police Department

Contact Information

Date

01/30/2018 13:10

Type

01/30/2018 12:28

01/30/2018 13:11

Cell

Phone (803)428-7024

Vehicle Information

Vehicle # Role

Contact Date Vehicle Type

Make

Model

Vehicle Year

Registration Number

State

Activity

Type: Arrest

Date

Activity Reference

139865

Description

Arrest Type: Taken Into Custody

ORI MO0110100

MO0110100

MO0110100

Charge(s):

20-51 (B),TRESPASS PUBLIC PLACE

Type: Booking

Date

Activity Reference 2018-00000264

Description

Booking

Charge(s):

ORI

ORI

20-51 (A),TRESPASS

Type: Case

Date

01/30/2018 12:10

Activity Reference

2018-00007401

Description

Subject Type: Suspect, Incident Type:

Trespass Charge(s):

20-51 (B),TRESPASS PUBLIC PLACE

Total Activity: 3

Adult Arrests Detail Report

Print Date/Time:

10/14/2019 09:27

Login ID:

gmurphy

St Joseph Police Department

ORI Number:

Status Date:

Arrest Status:

Case Number:

2018-00007401

MO0110100

Arrest Detail

Arrest Number:

139865 Adult

Arrestee Name: ARNOLD, STACY KAYE

Arrest Location:

3702 FREDERICK AVE Miranda Date:

Miranda By: Statement Taken By: Statement Type: Arrest Result Of: Age at Arrest:

Resisted Arrest: Campus Code:

No

Arrest Date:

From Arrest #: 139865 To Arrest #: 139865

01/30/2018 12:28

Arrestee Type:

Taken Into Custody

Resident Status: Basis for Caution: Alcohol Influence:

Drug Influence:

No No NA

Charges

Group/ORI

L/MO0110100 Charge Date/Time:

Counts:

Plea:

Larceny Code:

Other ORI:

Crime Code/Desc: 90J TRESPASS OF REAL PROPERTY

01/30/2018 12:28

False

ID Procedure: Resident Type:

Clears Case:

Statute/Desc:

20-51 (B) TRESPASS PUBLIC PLACE Commit

Attempt Code: Domestic Code: Disposition:

Disposition Date: NCIC Code:

Arresting Officer(s)

Injury Information

Badge Number/Last Name:

34265/Hailey

Assigned Bureau:

School Resource Officer:

No

None

Page: 1 of 1

Booking Card

ARNOLD, STACY KAYE

Print	Date/Time:
-------	------------

10/14/2019 09:28

Login ID:

gmurphy

St Joseph Police Department ORI Number: MO0110100



Booking #:

2018-00000264

Booking Date/Time:

01/30/2018 13:06

Jacket #:

629326

Inmate #:

Address:

#Error



Phone #: SSN:

(803)428-7024

DOB:

06/10/1985

Race:

White

Hair Color:

BLN

Age: 34 Eyes: BLU

Sex:

Female Height: 5ft 3 in

Weight: 138.0

Prisoner Type: Facility:

City Charge

Incarceration Reason:

Pod/Block:

Cell:

Bed:

Charge:

MO0110100

90J

20-51 (A)

TRESPASS

01/30/2018 13:12

Offense/Charge Date: Case Tracking ORI:

MO0110100

Case Tracking #:

2018-00007401

Severest:

No

Release Date/Time:

Release Reason:

Released To:

Inmate Signature:

01/30/2018 15:40

Bond

Date/Time

Released By:

68808 - Pickerel

Released to ORI:

Released To Additional Info:

I will have opportunity to contact family or counsel.

Booking Officer(s): Reviewed By:

Page: 1 of 1

ST. JOSEPH POLICE DEPARTMENT

CASE REPORT

501 FARAON STREET ST. JOSEPH, MO 64501

2018-0000740	1
ASSOCIATED CASES	

4) ADSEPH. Sed.	NOT AN OFFICIAL REPOR
ACCES NO.	WORKING COPY ONLY
REPORTED DATE/TIME	INCIDENT TYPE

	Trespass	Was a LAP form completed?	
N 1/30/2018 12:10	01/30/2018 12:28	3702 FREDERICK Ave	
N 1/30/2018 12:10 T	01/30/2018 12:28	3702 FREDERICK Ave	

		ATTEMPT/COMMIT COU	JNTS DESCRIPTION	
F 1	20-51 (B)	Commit 12	TRESPASS PUBLIC PLACE	
E 2 N			DOMESTIC CODE - N A	
S 3 E			DOMESTIC CODE - N A	
V	SUBJECT CODE	NAME (LAST, FIRST, MIDDLE)	Business PRIMARY PHONE	

Society Public Society STATEMENT TYPE ADDRESS (STREET ADDRESS, CITY, STATE, ZIP) OTHER PH DOB AGE RACE SEX HEIGHT WEIGHT HAIR COLOR EYE COLOR SOCIAL SE INJURY TYPE INJURY - MEDICAL TREATMENT INJURY - TRANSPORTED BY OTHER CONTACT INFO	
INJURY TYPE INJURY TYPE INJURY - MEDICAL TREATMENT INJURY TYPE INJURY - MEDICAL TREATMENT INJURY TYPE	ONE
INJURY TYPE INJURY - MEDICAL TREATMENT INJURY - TRANSPORTED BY OTHER CONTACT INFO	CURITY
SCHOOL/EMPLOYER NAME SCHOOL/EMPLOYER PHON	E

	Suspect			NAME (LAST, FIRST, MID							PRIMARY PHONE Cell (803)428-7024
	Arrestee			ARNOLD, ST	'ACY, K	AYE					(000)420-7024
S	STATEMENT TYPE None			ADDRESS (STREET ADD 1589 RACCO MAYSVILLE, SC	ON Rd . 29104-89	STATE.	ZIP)				OTHER PHONE
S P 1	06/10/1985	32	White				HEIGHT 5' 03	WEIGHT 138	HAIR COLOR BLN	EYE COLOR	30CIAL SECURITY 250-61-1007
E C	INJURY TYPE		INJURY -	MEDICAL TREATMENT	INJURY -	TRANS	SPORTED BY			OTHER CONT.	
Т	SCHOOL/EMPLOYER	NAME								SCHOOL/EMP	LOYER PHONE
	SCHOOL/EMPLOYER	ADDRES	S (STREET ADDRESS	i, CITY, STATE, ZIP)							

v -	SUBJECT CODE Complaina	nt		Adult LANGFORD,		IRY, L				PRIMARY PHONE Cell (785)850-1261
	Verbal			ADDRESS (STREET ADD 119 S 15TH S TROY, KS, 6608	DRESS, CITY	STATE, ZIP)				OTHER PHONE
1		AGE 24	White			M 5' 10	WEIGHT 230	HAIR COLOR BLN	EYE COLOR BLU	SOCIAL SECURITY 592-13-7217
	INJURY TYPE		INJURY -	MEDICAL TREATMENT	INJURY .	TRANSPORTED BY	1		OTHER CONT	
	SCHOOL/EMPLOYER	NAME							SCHOOLEMP	OYER PHONE
	SCHOOL/EMPLOYER	ADDRES:	S (STREET ADDRESS	, CITY, STATE, ZIP)					1	

Rehecca Hailay 01/20/2019 Creat City	REPORTING OFFICER 3426	99	DATE	REVIEWING OFFICER	DATE
1 order of the state of the sta	Rebecca	Hailey	01/30/2018	Greg Gilpin	01/30/2018

SUBJECT CODE									
30BJECT CODE			NAME (LAST, FIRST, MID	ODLE)					PRIMARY PHONE
STATEMENT TYPE			ADDRESS (STREET ADD	DRESS CITY ST	ATE ZIP)				
DOB	AGE	RACE							OTHER PHONE
	ACI	NACE .		i de la companya de l	SEX HEIGHT	WEIGHT	HAIR COLOR	EYE COLOR	SOCIAL SECURITY
NJURY TYPE		INJURY	- MEDICAL TREATMENT	INJURY - T	RANSPORTED E	3Y		OTHER CONT	ACT INFO
SCHOOL/FMPLOYER	NAME							SCHOOL/EMF	PLOYER PHONE
SCHOOL/EMPLOYER	ADDRESS	(STREET ADDRESS	S CITY STATE ZIP)						
			5, 5, 1, 5, 1, 12, 21, 3						
			•		3				
SUBJECT CODE			NAME (LAST, FIRST, MIDI	DLE)					PRIMARY PHONE
TATEMENT TYPE			ADDRESS (STREET ADDI	RESS, CITY, STA	ATE, ZIP)				OTHER PHONE
ОВ	AGE	RACE		s	EX HEIGHT	WEIGHT I	HAIR COLOR	EYE COLOR	SOCIAL SECURITY
JJURY TYPE		INTERV	MEDICAL TREATMENT						
		INGOICT -	MEDICAL TREATMENT	INJURY - TH	RANSPORTED B	Υ		OTHER CONTA	ACT INFO
CHOOL/EMPLOYER I	NAME							COLIOOL /FMBI	0.755 6.10
								SCHOOL/EMPL	OYER PHONE
CHOOL/EMPLOYER	ADDRESS (STREET ADDRESS	, CITY, STATE, ZIP)					SCHOOLEMPL	OYER PHONE
CHOOL/EMPLOYER /	ADDRESS (ST	. JOSEPH PC					ISCHOOL/EMPL	OYER PHONE
JBJECT CODE		ST C,	. JOSEPH PC ASE REPORT - A NAME (LAST, FIRST, MIDD Business	ADDITION				SCHOOLEMPL	PRIMARY PHONE Cell
UBJECT CODE Other Subjected Subject		ST C,	. JOSEPH PC ASE REPORT - A NAME (LAST, FIRST, MIDD Business EASTHILLS N	ADDITION	IAL WITN	IESSES	3		PRIMARY PHONE Cell (816)279-5667
UBJECT CODE Other Subje ATEMENT TYPE	ect No	ST C. t Listed	. JOSEPH PC ASE REPORT - A NAME (LAST, FIRST, MIDD Business	ADDITION ILE) IALL ESS, CITY, STAT	JAL WITN	Joseph	, MO, 64	501-	PRIMARY PHONE Cell
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ST. JOSEPH POLICE DEPARTMENT

WORKING COPY ONLY

CASE REPORT - NARRATIVE

CASE NO

2018-00007401

ON 01-30-2018 AT 1212 HOURS, OFFICER KNEIB AND I, OFFICER HAILEY RESPONDED TO 3702 FREDERICK AVE, IN REFERENCE TO TRESPASSING. CALLER, ZACKARY L. LANGFORD ADVISED A WHITE FEMALE WAS ASKED TO LEAVE THE MALL PROPERTY FOR SOLICITING AND REFUSED TO LEAVE.

OFFICER'S MADE CONTACT WITH STACY KAYE ARNOLD (06-10-1985), WHO IMMEDIATELY BECAME VERBALLY COMBATIVE WITH OFFICER'S. SHE TOLD US IT WAS HER FIRST AMENDMENT RIGHT AND SHE DIDN'T HAVE TO LEAVE BECAUSE IT WAS PUBLIC PLACE.

SECURITY OFFICER ZACKARY L. LANGFORD ADVISED HE WANTED TO PRESS CHARGES FOR TRESPASSING. I PLACED HER UNDER ARREST, SEARCHED HER PERSON, AND TRANSPORTED HER TO BOOKING.

I ISSUED ARNOLD A CITY SUMMONS AND BOOKED HER IN FOR CITY TRESPASS WITH A CASH OR SURETY BOND OF \$150.00.

Case Report 2018-00007401 Page 3 OF 3

ST. JOSEPH POLICE DEPARTMENT

ARREST REPORT

CASE NO.

2018-00007401

Г	JACKET TYPE	NAME (LAST, FIRST, N	(IDDLE)										
	Adult ADDRESS (STREET ADDRE	ARNOLD, S					T				Cell (803)428	7024	
	1589 RACCOO	N Rd MAYESV		04-8995	5		OTHER	PHONE			SOCIAL SECURIT	ry .	
A	06/10/1985 32	RACE			SEX	HEIGHT		HAIR C		EYE COLOR	250-61-10 DL NUMBER	307	DL STATE
R	COMPLEXION 32	BUILD			F HAIR	LENGTH	138	BLI	1	BLU HAIR STYLE	01142865	8 Ттеетн	MO
R	Fair	Average Me	dium		Lo	ng (Bel	ow S	houl	der)	Straigh	t	None	
S	Non Hispanic	None			No	Beard					None None		
T	ALIAS NAME (LAST, FIRST, N	MIDDLE)			1				ALIA	S DOB	ALIAS SOCIAL SE	CURITY	
E	INJURY TYPE	INJURY - MED	DICAL TREATMENT	INJURY	- TRANS	SPORTED BY			1	OTHER CONT	ACT INFO		
	SCHOOL/EMPLOYER NAME									001/001			
	EGUOQUEUR OVER									SCHOOL/EMP	LOYER PHONE		
	SCHOOL/EMPLOYER ADDRE	ESS (STREET ADDRESS, CIT	TY, STATE, ZIP)										
	64501-												
Α	LOCATION OF ARREST						ARRE	ST DATE	/ TIME		ARREST TYPE		
RI	3702 FREDERIC	CK Ave					1/3	0/20	18	12:28	Taken Int	o Custo	vb
EF	RESISTED ARREST?		ALCOHOL II	NFLUENCE?					DF	UG INFLUENCE			
S O	No No	☐ ∩ИКИОМИ	☐ YES	□ио		UNKNOWN					JNO DNK	NOWN	
•	INO		No						N	lo			
C #	ODDINAMOS LOCATION												
H 1	ORDINANCE / STATUTE 20-51 (B)		Commit Commit	COUNTS 1		ESPAS	e DIII	DI IC	DI /	VOE.			
A 2 R 3						LOFAG	3 7 0	BLIC	PLA	ACE			
G 4													
E 5 S 6													
3 0													
	ON 01-30-2018	AT 1212 HOUR	S, OFFICER	KNEIB .	AND	I, OFFI	CER	HAIL	.EY	RESPON	NDED TO 3	702	
	FREDERICK AV FEMALE WAS A	L, IN NEFEREI	NCE TO TRE	SPASS	IN(=	CALLE	P 7	$\Lambda \cap K$	NDV	I I ANIC	CODD AD	MOED A	WHITE
N A													
2	OFFICER'S MAI	DE CONTACT V	WITH STACY	KAYE	ARN	OLD (0	6-10-	1985), W	но іммі	EDIATELY	BECAME	
3	VERBALLY COI DIDN'T HAVE T	MOWING ANILL	I OFFICER 3.	SHE	(n)		WAS	HER	FIR	ST AME	NDMENT F	RIGHT A	ND SHE
r													
,	SECURITY OFF	ICER ZACKAR	Y L. LANGFO	RD AD	VISE	D THE	Y WA	NTE	D T	PRESS	CHARGE	SFOR	
	TRESPASSING. BOOKING. SHE	WAS ISSUED	R UNDER ARI A CITY SUMIN	REST, S	SEAF	RCHED	HER	PER	SOI	N, AND T	RANSPOR	TED HE	R TO
	SURETY BOND	OF \$150.00.			.IAD	DOORE	ט דל	JK C	1 1	I KESPA	SS WITH A	CASH	JR
													7 7
RESTI	NG OFFICER												
426	5\ Hailey, Rebec	ca, S,											

	and a proper and the	0110100 C	In which .	and a	E ASS. E	
	T. JOSEPH / T. JOSEPH, I	POLICE DE	PT.		## AT -	
	vogern, i	UNIFORM	a 01727		008	1960
STATE OF MIS					Mision	without Seal Smith Smith
OURT ADDRESS	IT COURT OF SS (STREET, CI	BUCHAI	VAN	COUNTY	MUNICIP.	AL GORC
account Account	411 JUI	LES STRE	ET, S	T. JOSEP	H. MO 64	601
COURT DATE	18 00		CARA	COURT PHONE	MUNICIPAL	CIRC
I. KNOWING	THAT EALOR	2:30 E	JPM II	VO.	COURT (816) 271-4686	(816) 271
		CAUSE TO B	S ON 11 ELIEVE	11S FORM AF THAT:	ie-punishai	(816) 271 BLE BY LAW, S
9WARGUT DAY	PATURE	HWY CLASS		AT OR NEAR (CONTRACTOR AND	- C
WITHIN CITY	COUNTY AND	a	40000	5107	PREL	
NAME (LAST, FI	AST, MIDDLE	/ OTALE ACU	TICOAL	11		
AKA	(DOL)	, SIA	CY,	SI		
ISTREET ADDRE	The Sale	2000			***************************************	
CITY				No. of Manager	STATE	ZIP CODE
DATE OF BIRTH	WILLE BACE				50	29/04
6-10-8	3	is.		SEX T	HEIGHT SOR	WEIGHT
BRIVER'S LIC. NO.		250611	OAT	7 -	CDL .	\$MATE.
EMPLOYER		0430W11		(DYE	S ANO	180

ADDRESS (STREE	ET, CITY, STATE,	ZIP)			Was a second	
	pan.					
DID UNLAWPULL V I YEAR	LY LIOPE MAKE	RATE/DRIVE	A P/		DCMV	O WITH HAZI
Y YEAR	MAKE	/	MODE	L. American	STYLE	COLOR
	WEIGH					
C HEGISTERED	WEIGHT U	L NOMBI	ER	11 1	STATE	YEAR
DID THEN AND DELIEF ARE AS				OFFENSE 1		UPPORTING TI
DID THEN AND DELIEF ARE AS		IC AIT THE FOLI		OFFENSE 1		
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